



OVERSIZE LOAD PERMITS SUBMITTAL REQUIREMENTS E-26

Development Services
Land Development Engineering
1635 Faraday Avenue
760-602-2750
Fax No. 760-602-1052
www.carlsbadca.gov

An Oversize Load or Overweight Load Permit is required any time a vehicle or object over the legal length, width, height, or weight, is moved through the City of Carlsbad.

Please submit the following:

- ____ 1. Completed application. This will become the permit upon approval.
- ____ 2. If the permit is for an extreme oversize greater than 14 feet wide or over weight load, special approval may be required. Contact the Land Development Engineering Division, (760) 602-2750, for more information.
- ____ 3. Certificate of Insurance. The Trucking Company shall provide a certificate of insurance for personal injury and property damage liability in the amount of at least \$1,000,000 (one million dollars) per incident. Certificates providing less than one month's liability insurance coverage will not be accepted.

Certificate must specifically name the City of Carlsbad as "Additionally Insured", as well as "Certificate Holder". It is the responsibility of the **Trucking Company** to notify the city of any insurance policy changes or extensions.

INSURANCE CARRIER: _____

EXPIRATION DATE: _____

Oversize Load Permit fees:

\$16.00 – Single Trip

\$90.00 – Annual Permit (One year or insurance expiration, whichever occurs first)

Request for permit must be filed at least two working days prior to proposed haul.



**APPLICATION
OVERSIZE OR OVERWEIGHT
LOAD PERMIT
E-26**

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In compliance with your request and subject to all of the terms, conditions and restrictions written below and the attachments, permission is hereby granted to:		Permit Valid Between _____ AM ____/____/____ _____ PM ____/____/____ And Sunset		Permit Number: _____ _____ Authorized City Representative							
		Moving Authorized									
		Saturday	Yes <input type="checkbox"/> No <input type="checkbox"/>								
		Sunday	Yes <input type="checkbox"/> No <input type="checkbox"/>								
		Sunset to Sunrise	Yes <input type="checkbox"/> No <input type="checkbox"/>								
Transporter: _____		Loan or Equipment and Model No.: _____		Applicant shall deliver one copy of permit to the City of Carlsbad Police Department. 2560 Orion Way. (or FAX (760) 929-0243)							
Address: _____						Vehicle License No.: _____					
City/State/Zip _____											
Phone No. _____											
FAX No. _____		Type of Vehicle: _____		King Pin to Last Axle: _____		Combination Vehicle Length: _____		Sending Station: _____		Receiving Station: _____	
<input type="checkbox"/> Haul <input type="checkbox"/> Drive <input type="checkbox"/> Tow											
LOADED DIMENSIONS DIFFERENT THAN OR WEIGHTS EXCEEDING THOSE SHOWN BELOW ARE NOT AUTHORIZED											
Maximum Height: _____			Maximum Width: _____			Maximum Overall Length: _____			Maximum Overhang: _____		
Pilot Car Required: _____			<input type="checkbox"/> One (for loads 12' to 14')			<input type="checkbox"/> Two (for loads over 14' wide)					
Axle No.		1	2	3	4	5	6	7	8	9	
Number of Tires											
Axle Spacing											
Axle Width											
Weight											
Origin: _____				Destination: _____				Trips: _____			
Authorized Roads and Streets: _____ _____											
This permit covers only travel on streets maintained by the City of Carlsbad. No hauling permitted between 6:00 to 9:00 a.m. and 3:30 to 6:30 p.m. One approved copy of permit must be in vehicle at all times. Permittee shall indemnify, hold harmless and defend the City of Carlsbad or its officers or employees from all claims, damage, or liability to persons or property arising from or caused by any activity or work done pursuant to this permit unless the damage or liability was caused by the sole active negligence of the city or its officers or employees.										Attachments <input type="checkbox"/> Permits Conditions <input type="checkbox"/> Routing Map <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____	
<input type="checkbox"/> Cash <input type="checkbox"/> Check Fee: \$ _____ <input type="checkbox"/> Credit Card <input type="checkbox"/> Exempt			Permittees Authorized Agent (signature) _____						_____/____/____ Date		